



Benign prostatic hyperplasia (BPH): introduction of two new Medical Benefits Schedule (MBS) items and removal of four MBS items

Last updated: 9 February 2024

- From **1 March 2024**, two new MBS items will be introduced to treat patients with BPH:
 - Item 37204 for prosthetic urethral lift (PUL)
 - Item 37205 for transurethral water vapour ablation (TUWA)
- Additionally, from **1 March 2024**, four outdated items for minimally invasive services for treating BPH will be removed from the MBS. The four items being removed are:
 - Items 37230 and 37233 for transurethral microwave thermotherapy (TUMT)
 - Item 37202 for continuation of initial treatment for transurethral radio-frequency needle ablation (TUNA)
 - Item 37206 for continuation of initial treatment for transurethral resection of the prostate (TURP)
- The introduction of the new items and removal of the outdated items was supported by the Medical Services Advisory Committee (MSAC) in July 2022 and approved by Government for funding on the MBS in the 2023-24 Budget.
- These changes are relevant for specialists involved in treating BPH, including urologists, and patients.

What are the changes?

Effective 1 March 2024, there will be there will be a new MBS item (37204) for prostatic urethral lift for the treatment of benign prostatic hyperplasia, and a new MBS item (37205) for transurethral water vapour ablation for the treatment of benign prostatic hyperplasia. The new item descriptors are on page 3 of this factsheet.

Additionally, four outdated items for minimally invasive services for treating BPH will be removed from the MBS: 37202, 37206, 37230 and 37233.

Why are the changes being made?

At its July 2022 meeting, the Medical Services Advisory Committee (MSAC) supported listing of services for PUL and TUWA under MSAC application 1612 for PUL and MSAC application 1586 for TUWA and with reference to the outcomes of MSAC application 1697, the *Review of different minimally invasive therapeutic approaches for the management of patients with benign prostatic hyperplasia*.

Based on the outcomes of application 1697, MSAC also advised item 37202 for TUMT should be delisted as this procedure is not as effective or safe as TURP and has a low and declining service volume. Further, TUNA and TURP MBS items 37202 and 37206, respectively, should be removed as items 37201 for TUNA and 37203 for TURP can be used instead for retreatment.

MSAC advised that the MBS items for TUMT be removed.

Further details about MSAC applications can be found under MSAC Applications on the MSAC website: www.msac.gov.au.

What does this mean for providers?

Providers will benefit from having access to new MBS items specifically used for PUL or TUWA treatment of benign prostatic hyperplasia. Providers will continue to have access to MBS items for a range of appropriate non-invasive treatments for BPH that support modern best practice.

How will these changes affect patients?

The new item for PUL will support patients to access Medicare benefits for clinically appropriate non-invasive treatments for BPH that reflect modern practice. PUL were previously being funded in an interim basis under item 36811 for cystoscopy with insertion of urethral prosthesis. TUWA services were being funded on an interim basis on the MBS under MBS item 37201; Transurethral radio-frequency needle ablation of the prostate (TUNA).

Patients will have continued access to clinically appropriate MBS items for a range of appropriate non-invasive treatments for BPH that support modern best practice and will not be impacted by delisting four items.

Who was consulted on the changes?

Consultation has been undertaken with key stakeholders, clinical experts and providers, and consumer health representatives as part of the MSAC process. Consultation was undertaken regarding these changes with the Australian and New Zealand Association of Urological Surgeons (ANZAUS), the Australian Medical Association (AMA), the Royal Australian and New Zealand College of Radiologists (RANCZR), Australian Diagnostic Imaging Association (ADIA) and Prostate Cancer Foundation of Australia (PCFA).

How will the changes be monitored and reviewed?

The impact of these changes will be closely monitored. The Department will continue to work with stakeholders following implementation of the changes.

All MBS items are subject to compliance processes and activities, including random and targeted audits which may require a provider to submit evidence about the services claimed.

Where can I find more information?

The full item descriptor(s) and information on other changes to the MBS can be found on the MBS Online website at www.mbsonline.gov.au. You can also subscribe to future MBS updates by visiting MBS Online and clicking 'Subscribe'.

The Department of Health and Aged Care provides an email advice service for providers seeking advice on interpretation of the MBS items and rules and the *Health Insurance Act 1973* and associated regulations. If you have a query relating exclusively to interpretation of the Schedule, you should email askMBS@health.gov.au.

Private health insurance information on the product tier arrangements is available at www.privatehealth.gov.au. Detailed information on the MBS item listing within clinical categories is available on the [Department's website](#). Private health insurance minimum accommodation benefits information, including MBS item accommodation classification, is available in the latest version of the *Private Health Insurance (Benefit Requirements) Rules 2011* found on the [Federal Register of Legislation](#). If you have a query in relation to private health insurance, you should email PHI@health.gov.au.

Subscribe to '[News for Health Professionals](#)' on the Services Australia website and you will receive regular news highlights.

If you are seeking advice in relation to Medicare billing, claiming, payments, or obtaining a provider number, please go to the Health Professionals page on the Services Australia website or contact the Services Australia on the Provider Enquiry Line – 13 21 50.

The data file for software vendors when available can be accessed via the [Downloads](#) page.

New item descriptors (to take effect 1 March 2024)

Category 3: THERAPEUTIC PROCEDURES

Group T8 – Surgical Operations

Subgroup 5 – Urological

37204

Cystoscopy with insertion of prostatic implants for the treatment of benign prostatic hyperplasia

(Anaes.)

Fee: \$876.75 **Benefit:** 75% = \$657.71 85% = \$745.24

Private Health Insurance Classification:

- **Clinical category:** Male reproductive system
- **Procedure type:** Type B

Category 3: THERAPEUTIC PROCEDURES

Group T8 – Surgical Operations

Subgroup 5 – Urological

37205

Prostate, ablation by water vapour with or without cystoscopy and with or without urethroscopy

(Anaes.)

Fee: \$355.95 **Benefit:** 75% = \$266.96 85% = \$302.56

Private Health Insurance Classification:

- **Clinical category:** Male reproductive system
- **Procedure type:** Type B

Please note that the information provided is a general guide only. It is ultimately the responsibility of treating practitioners to use their professional judgment to determine the most clinically appropriate services to provide, and then to ensure that any services billed to Medicare fully meet the eligibility requirements outlined in the legislation.

This factsheet is current as of the Last updated date shown above and does not account for MBS changes since that date.